

MULTIPLE DEPENDENT CLAIM  
FEE CALCULATION SHEET  
(FOR USE WITH FORM PTO-876)

SERIAL NO. 9/526 403 FILING DATE

APPLICANT(S)

7/25/03 3/14/03

CLAIMS

	AS FILED		AFTER 1st AMENDMENT		AFTER 2nd AMENDMENT	
	IND.	DEP.	IND.	DEP.	IND.	DEP.
1	/		/			
2		/	/			
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50		/	/			
TOTAL IND.						
TOTAL DEP.						
TOTAL CLAIMS						

61		/	/			
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100						
TOTAL IND.	7		6			
TOTAL DEP.	64		64			
TOTAL CLAIMS	71		70			